

117TH CONGRESS
2D SESSION

S. 3800

To amend the Public Health Service Act to establish and support a network of Centers for Public Health Preparedness and Response.

IN THE SENATE OF THE UNITED STATES

MARCH 10 (legislative day, MARCH 7), 2022

Mr. MARSHALL (for himself, Mr. LUJÁN, Mr. SCOTT of South Carolina, Mrs. GILLIBRAND, Mr. CASSIDY, and Mr. CARDIN) introduced the following bill; which was read twice and referred to the Committee on Health, Education, Labor, and Pensions

A BILL

To amend the Public Health Service Act to establish and support a network of Centers for Public Health Preparedness and Response.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Centers for Public
5 Health Preparedness and Response Reauthorization Act”.

6 **SEC. 2. CENTERS FOR PUBLIC HEALTH PREPAREDNESS**
7 **AND RESPONSE.**

8 (a) IN GENERAL.—Section 319F of the Public
9 Health Service Act (42 U.S.C. 247d–6) is amended—

1 (1) by striking subsection (d) and inserting the
2 following:

3 “(d) CENTERS FOR PUBLIC HEALTH PREPAREDNESS
4 AND RESPONSE.—

5 “(1) IN GENERAL.—The Secretary, acting
6 through the Director of the Centers for Disease
7 Control and Prevention, may award grants, con-
8 tracts, or cooperative agreements to institutions of
9 higher education, including accredited schools of
10 public health, or other nonprofit private entities to
11 establish or support a network of Centers for Public
12 Health Preparedness and Response (referred to in
13 this subsection as ‘Centers’).

14 “(2) ELIGIBILITY.—To be eligible to receive an
15 award under this subsection, an entity shall submit
16 to the Secretary an application containing such in-
17 formation as the Secretary may require, including a
18 description of how the entity will—

19 “(A) coordinate relevant activities with
20 State, local, and Tribal health departments and
21 officials, health care facilities, and health care
22 coalitions to improve public health preparedness
23 and response, as informed by the public health
24 preparedness and response needs of the commu-
25 nity, or communities, involved;

1 “(B) prioritize efforts to implement evi-
2 dence-informed or evidence-based practices to
3 improve public health preparedness and re-
4 sponse, including by helping to reduce the
5 transmission of emerging infectious diseases;
6 and

7 “(C) use funds awarded under this sub-
8 section, including by carrying out any activities
9 described in paragraph (3).

10 “(3) USE OF FUNDS.—As a condition of receiv-
11 ing funds under this subsection, Centers established
12 or supported shall carry out activities to advance
13 public health preparedness and response capabilities,
14 which may include by—

15 “(A) identifying, translating, and dissemi-
16 nating promising research findings or strategies
17 into evidence-informed or evidence-based prac-
18 tices to inform preparedness for, and responses
19 to, chemical, biological, radiological, or nuclear
20 threats, including emerging infectious diseases,
21 and other public health emergencies, which may
22 include conducting research related to public
23 health preparedness and response systems;

24 “(B) improving awareness of such evi-
25 dence-informed or evidence-based practices and

1 other relevant scientific or public health infor-
2 mation among health care professionals, public
3 health professionals, other stakeholders, and the
4 public, including through the development, eval-
5 uation, and dissemination of trainings and
6 training materials, consistent with section
7 2802(b)(2), as applicable and appropriate, to
8 support preparedness for, and responses to,
9 such threats;

10 “(C) utilizing and expanding relevant tech-
11 nological and analytical capabilities to inform
12 public health and medical preparedness and re-
13 sponse efforts;

14 “(D) expanding activities, including
15 through public-private partnerships, related to
16 public health preparedness and response, in-
17 cluding participation in drills and exercises and
18 training public health experts, as appropriate;
19 and

20 “(E) providing technical assistance and ex-
21 pertise related to responses to public health
22 emergencies, as appropriate, to State, local, and
23 Tribal health departments and other entities
24 pursuant to paragraph (2)(A).

1 “(4) DISTRIBUTION OF AWARDS.—In awarding
2 grants, contracts, or cooperative agreements under
3 this subsection, the Secretary shall support not
4 fewer than 10 Centers, subject to the availability of
5 appropriations, and ensure that such awards are eq-
6 uitably distributed among the geographical regions
7 of the United States.”; and

8 (2) in subsection (f)(1)(C), by striking “, of
9 which \$5,000,000 shall be used to carry out para-
10 graphs (3) through (5) of such subsection”.

11 (b) REPEAL.—Section 319G of the Public Health
12 Service Act (42 U.S.C. 247d–7) is repealed.

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